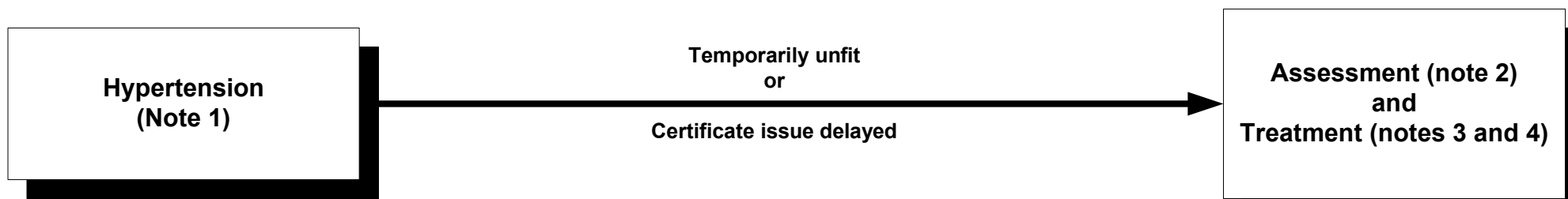


# JAA Class 1/2 certification - Hypertension



## NOTES:

- 1) Defined in JAR-FCL 3 as a blood pressure consistently exceeding 160 systolic and/or 95 diastolic. Treatment, however, may be recommended at lower levels. 24-hour ambulatory blood pressure recording may be required (especially for Class 1). If hypertension is confirmed the pilot should be made temporarily unfit or medical certificate issue should be delayed.
- 2) Class 1 assessment should be by a cardiologist, Class 2 by a cardiologist or GP. Risk factors analysis will include measurement of lipid levels, checks for diabetes, family history, smoking and alcohol history, and weight. Investigations should include urea and electrolytes, resting ECG and echocardiogram (the latter is not always necessary for Class 2 but will be if the ECG shows Left Ventricular Hypertrophy).
- 3) Acceptable medication:
  - An ACE inhibitor
  - An angiotensin-II receptor antagonist
  - A calcium-channel blocker
  - A beta-blocker (cardioselective preferred, eg atenolol (max dose 50mg/day) or bisoprolol. Not propranolol)
  - A thiazide diuretic (usually bendroflumethiazide max dose 2.5mg/day)
  - A potassium-sparing diuretic (eg spironolactone or amiloride)
- 4) Unacceptable medication:
  - Centrally acting agents (eg methyldopa)
  - Adrenergic blocking drugs (eg guanethidiine)
  - Alpha-blocking drugs (eg doxazosin)
  - Loop diuretics (eg furosemide)
- 5) A full report (from cardiologist or GP) to the AME should confirm that the BP has stabilised on acceptable treatment (for a minimum of 2 weeks) and that the pilot has no treatment-related side-effects. Attention to risk factors should be apparent. If satisfactory a fit assessment can be made (the AMS will need to reverse a "temporarily unfit" notice if one has been issued) and a medical certificate can be issued. Reports should be copied to the AMS.
- 6) Cardiology follow up may be required. A change of medication or increase in dose will require a further period of grounding (usually two weeks) and reassessment by the AME.
- 7) Pilots with complications of hypertension or multiple risk factors may need to be referred to the AMS. Multicrew or safety pilot limitations (OML or OSL) may be required.

**Fit JAR Class 1/2  
(note 6)**

**Possible OML/OSL  
(note 7)**

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